

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 02, 2005 8:00 am**  
**Secretary of State**

03-02-2005 90077 045 \*\*\*150.00

**DOCUMENT # P99000094389**

1. Entity Name  
**L & L TRUCK LINES, INC.**



Principal Place of Business  
**503 SHARON HILL COURT  
WINTER HAVEN, FL 33880 US**

Mailing Address  
**503 SHARON HILL COURT  
WINTER HAVEN, FL 33880 US**

**20017706**

2. Principal Place of Business  
**75 Charlotte Dr.**  
Suite, Apt. #, etc.

3. Mailing Address  
**75 Charlotte Drive**  
Suite, Apt. #, etc.



02212005 Chg-P CR2E034 (10/03)

City & State  
**Winter Haven FL**  
Zip  
**33880** Country  
**U.S.**

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**Winter Haven FL**  
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**33880** Country  
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4. FEI Number  
**31-1664405** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MORROW, LINDA G  
503 SHARON HILL COURT  
WINTER HAVEN, FL 33880-1063**

7. Name and Address of New Registered Agent

Name  
**Larry D. Morrow Sr.**  
Street Address (P.O. Box Number is Not Acceptable)  
**75 Charlotte Drive**  
City  
**Winter Haven** FL Zip Code  
**33880**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Larry D. Morrow**

**President** **02/21/2005**

Signature of registered agent and the applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
MORROW, LARRY D SR  
503 SHARON HILL COURT  
WINTER HAVEN, FL 33880** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
Morrow, Larry D. Sr.  
75 Charlotte Drive  
Winter Haven FL 33880** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Larry D. Morrow** **President**

**02/21/2005 863-604-0415**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #